



Division of Professional Regulation  
861 Silver Lake Blvd.  
Cannon Building, Suite 203  
Dover, Delaware 19904-2467  
(302) 744-4500

## DUPLICATE RENEWAL NOTICE

DUE DATE: June 30, 2005

Complete and return this renewal application with check or money order made payable to "State of Delaware." Incomplete renewal applications will be returned and may delay renewal of this permit. Your permit to practice will be renewed only if you have completed the required continuing professional education and submitted the Continuing Professional Education Log. See instructions on the enclosed Log. For information about the continuing professional education requirement, see Section 10.0 of the Rules and Regulations available at [www.dpr.delaware.gov/boards/accountancy](http://www.dpr.delaware.gov/boards/accountancy).

1. Enter Employer or Firm Name: \_\_\_\_\_

2. Has your permit to practice accountancy ever been revoked, suspended, or has other disciplinary action been taken, or has your application for licensure or registration been refused, revoked or suspended by the proper authorities of another state, territory or country?

YES\_\_\_\_ NO\_\_\_\_

3. Have you been convicted of or entered a plea of guilty or *nolo contendere* (no contest) to any felony, misdemeanor or any other criminal offense in any jurisdiction since your last renewal?

YES\_\_\_\_ NO\_\_\_\_

YOUR SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

NAME: (Please Print) \_\_\_\_\_ ☐ Check box if new address

STREET ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

EMAIL: \_\_\_\_\_

DUE DATE: June 30, 2005

PROFESSION (circle one):	AMOUNT DUE:	LATE FEE:	LICENSE NUMBER:
PA Permit	\$90.00	Not applicable	PA- _____
CPA Permit	\$93.00	Not applicable	CA- _____

*All sections must be completed. Incomplete forms will not be accepted. Make checks payable to the "State of Delaware."*